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CONFIRMATION NO. 6612

<b>SERIAL NUMBER</b> 10/773,409	<b>FILING or 371(c) DATE</b> 02/09/2004 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> NPR-152		
<b>APPLICANTS</b> Katsuhiro Hiejima, Osaka-shi, JAPAN; <i>CDK 10/25/07</i> <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <i>COLA 10/25/07</i> JAPAN 2003-33635 02/12/2003 JAPAN 2003-33636 02/12/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/06/2004						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <i>[Signature]</i> 10/25/07 Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials <i>U-A</i>	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWINGS</b> 8	<b>TOTAL CLAIMS</b> 25	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> KUBOVCIK & KUBOVCIK SUITE 710 900 17TH STREET NW WASHINGTON, DC 20006						
<b>TITLE</b> Indwelling catheter						
<b>FILING FEE RECEIVED</b> 910	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			